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APPLICANTS

ALBERT ALBY, ESSERTINES, FRANCE;

**** CONTINUING DATA *******This application is a 371 of PCT/FR98/00543 03/18/1998 *OK NEW***** FOREIGN APPLICATIONS *******FRANCE 97/03277 03/18/1997 *OK NEW***IF REQUIRED, FOREIGN FILING LICENSE GRANTED ****

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Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY FRANCE	SHEETS DRAWING 3	TOTAL CLAIMS 10	INDEPENDENT CLAIMS 1
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged <i>Alberty Woodell</i> Examiner's Signature Initials				

ADDRESS

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TITLE

IMPLANT FOR OSTEOSYNTHESIS DEVICE AND TOOL FOR SETTING SUCH IMPLANT

FILING FEE RECEIVED 970	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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